

Issue Classification

(Assistant Examiner) (Date)

(Legal Instruments Examiner) (Date)

(Primary Examiner)

(Date)

Total Claims Allowed:

O.G.
Print Claim(s)

1

O.G.
Print Fig.

3

<input type="checkbox"/> Claims renumbered in the same order as presented by applicant										<input type="checkbox"/> CPA			<input type="checkbox"/> T.D.			<input type="checkbox"/> R.1.47		
Final	Original		Final	Original		Final	Original		Final	Original		Final	Original		Final	Original		
	1			31			61			121			151			181		
	2			32			62			122			152			182		
	3			33			63			123			153			183		
	4			34			64			124			154			184		
	5			35			65			125			155			185		
	6			36			66			126			156			186		
	7			37			67			127			157			187		
	8			38			68			128			158			188		
	9			39			69			129			159			189		
	10			40			70			130			160			190		
	11			41			71			131			161			191		
	12			42			72			132			162			192		
	13			43			73			133			163			193		
	14			44			74			134			164			194		
	15			45			75			135			165			195		
	16			46			76			136			166			196		
	17			47			77			137			167			197		
	18			48			78			138			168			198		
	19			49			79			139			169			199		
	20			50			80			140			170			200		
	21			51			81			141			171			201		
	22			52			82			142			172			202		
	23			53			83			143			173			203		
	24			54			84			144			174			204		
	25			55			85			145			175			205		
	26			56			86			146			176			206		
	27			57			87			147			177			207		
	28			58			88			148			178			208		
	29			59			89			149			179			209		
	30			60			90			150			180			210		